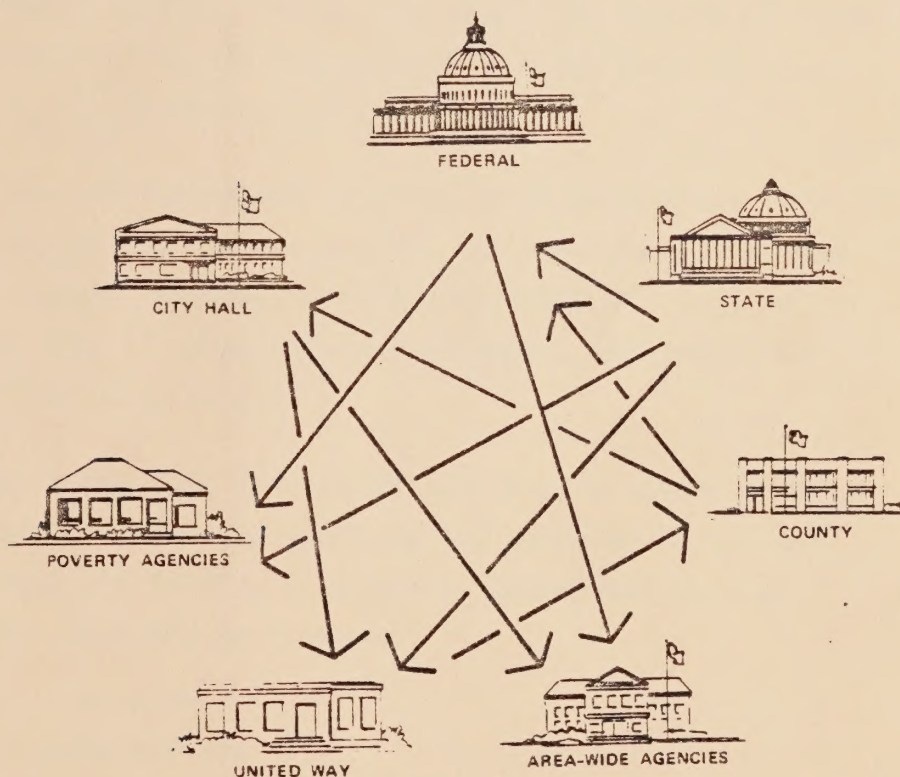


[United way of the bay area]
Alameda county -- social conditions
social service -- Ca -- Alameda co.
Public welfare " "
Charities
8

HUMAN NEEDS AND HUMAN SERVICES IN ALAMEDA COUNTY

Part I Overview for United Way Decisionmakers



Prepared for:



United way of the Bay Area

410 Bush Street
San Francisco, CA 94108

February 1979

INSTITUTE OF GOVERNMENTAL
STUDIES LIBRARY

AUG 28 1979

UNIVERSITY OF CALIFORNIA
REAL ESTATE COLLECTION



7902592
pt.1

INSTITUTE OF GOVERNMENTAL
STUDIES LIBRARY

DEC 16 2024

UNIVERSITY OF CALIFORNIA

PREFACE

This report--Part I--An Overview for United Way Decision Makers--is designed to help United Way volunteers and staff make better decisions about human needs and human services in the Bay Area. It is one of three reports provided to United Way of the Bay Area (UWBA) for each Bay Area County by SRI International and Morrison/Rowe.

The introductory part of the report provides a perspective on the use of data presented in the body of the report. It discusses important trends affecting UWBA, issues relating to different kinds of data, alternative roles UWBA could play in human services planning, and resources available to United Way decision makers.

The middle section of the report includes six modular charts that summarize data collected on needs and services and analyzed by SRI and Morrison/Rowe and presents the data in a series of individual modules divided by service area. Each module contains:

- Problem and need indicators
- Findings of community surveys
- A service expenditure profile (subdivided into public, United Way, and other voluntary agency categories)
- A listing of issues relevant to the cluster.

Worksheets will be provided to the County Planning Committees for preparation of policies to recommend in each of the service areas based on the information in the planning modules.

The final section of the report contains a listing of important planning documents provided by the County of which United Way decision makers should be aware.

It is expected that the planning modules will be continually added to and fine tuned during the course of the United Way planning process.

Updating should be undertaken based on new public planning documents and additions and deletions to United Way agencies or the services they provide. The planning modules should be adapted over time to allow them to provide as much assistance as possible in the making of planning and allocation decisions that affect the activities of United Way of the Bay Area.

A second report--Part II--Background and Analysis--amplifies and highlights the material presented in this report. It discusses implications of each county's data, problems of interpretation, and some of the broader implications of the material collected.

A third report provided to United Way for each county--Part III-Recommendations--provides the views of SRI and Morrison/Rowe as to some appropriate United Way policies in each separate area for consideration by United Way planning committees in each county as they develop their own recommendations and strategies for action.

CONTENTS

PART I--OVERVIEW FOR UNITED WAY DECISION MAKERS

Preface	ii
I. Introduction	I-1-1
Trends Affecting United Way Human Services Planning	I-1-1
What the Planning Modules Do and Do Not Do	I-1-3
Choosing an Appropriate Role in Service Areas	I-1-8
Resources Available to United Way Decision Makers	I-1-11
II. Planning Modules	
1. Employment and Economic Security	
2. Health	
A. Medical Care Services	
B. Mental Health Services	
3. Basic Material Needs	
4. Public Protection	
5. Social Development Services	
A. Supplemental Education	
B. Counseling and Residential Care	
C. Individual and Family Services	
D. Group Oriented Services	
6. Community Organization and Management	
III. County Planning Documents	I-3-12

PROJECT DIRECTOR Steven A. Waldhorn, SRI International
ASSOCIATE DIRECTOR Jack Morrison, Morrison and Rowe

SRI INTERNATIONAL STAFF AND CONSULTANTS

James O. Gollub
Jean Lotridge
Lois Kraft
Cecilia Molesworth
David Thompson
Sidney Gardner
Arthur Schiff

MORRISON ROWE STAFF AND CONSULTANTS

Tom Rowe
Janet Hofmann

I INTRODUCTION

Trends Affecting United Way Human Services Planning

The need for United Way of the Bay Area (UWBA) to be more responsive to changing needs in the Bay Area is related to a number of general trends facing both nonprofit providers and the government sector responsible for meeting human service needs. The need for better approaches for identifying needs and establishing priorities in United Way planning is primarily a consequence of three factors:

- United Way of the Bay Area (like many other United Ways) has been the subject of increasing criticism in recent years by groups claiming that UWBA funding practices are unresponsive to some minority needs or that UWBA programs are not in accord with changing patterns of need in the Bay Area. Conflicts have arisen both between UWBA and other nonprofit charitable organizations and between UWBA and outside groups representing particular interests.
- Local governments have increasingly dominated human services in recent years primarily through their role in allocation of Federal human service dollars. Not only do they provide vastly more resources for meeting human needs generally, they also often provide more funds to United Way agencies than does United Way itself. The UWBA will increasingly have to participate in emerging local government human service planning efforts--such as those in San Francisco, Contra Costa, and San Mateo counties--if it is to meaningfully affect human services allocation.
- While United Way funding has often served to fill gaps in public human services funding, there is increasing feeling both at the national and local levels that flexible private funds should not be used to patch up the public human service system. Rather, as the Commission on Private Philanthropy and Public Needs has pointed out, nongovernmental funds, such as those allocated by United Way

of the Bay Area, should be used to improve overall patterns of service delivery and to meet needs not yet recognized by the public sector.

United Way planning must address these factors if UWBA is to play the positive role it should in helping government, community-based organizations, and the private sector effectively respond together to the challenges facing those involved in meeting human needs now and over the next few years.

What the Planning Modules Do And Do Not Do

The planning modules that follow present available needs and services data for United Way decision makers in tabular form so that the information can be used more easily. The discussion in this section covers a number of general characteristics of the data which should be noted in using it. Overall, the data point out problem areas where United Way might be active and describe the roles now played by public, United Way, and other non-public providers. In doing so, the body of data is an invaluable guide to decision makers. However, as discussed below, it is not sufficient by itself for choosing priorities. Other considerations which decision makers must take into account include the role UWBA chooses to play in the broader human service system; the unique resources United Way can bring to bear on a problem; and the particular values United Way chooses to maximize (e.g., aid to those most in need, such as the poor, or aid to emerging groups, such as gay alcoholics or battered women). Used appropriately, the data can provide a solid empirical framework to decision makers by allowing them to take into account what is known in each service area before making decisions.

Social Indicators

Ideally, social indicators for each field of service would be current, comprehensive, and comparable. In fact, however, this is the case in virtually no field of service because few reliable social indicators relative to United Way's service fields are now collected by public agencies at local, state, or Federal levels, aside from those in the decennial census.

Some of the indicators of need presented in the modules relate fairly directly to problems (e.g., the unemployment rate indicates to an extent the number of persons who might benefit from employment counseling although some of the persons only need jobs). Other indicators are quite indirect,

e.g., the size of the population-in-poverty is used by some agencies to indicate the extent of mental illness, although obviously the relationship between income and mental illness only partly explains need in this area. Finally, some of the indicators presented measure services rather than need (e.g., the number of hospital beds per 1000 population does not indicate how many people need hospitalization).

Even excellent social indicators, if available, would not establish comparability across populations or areas in need. For example, one might know that 1,000 children in Area A are in need of child care while 2,000 aged in Area B require in-home health services. These data by themselves do not show which group should receive what allocation of limited resources.

Despite these inadequacies, needs indicators are very useful. They tell decision makers attempting to select priority areas what the magnitude of problems is (e.g., 100, 1000, or 10,000); they illustrate trends (e.g., 10,000 in 1975 to 12,000 in 1977); and they identify concentrations (e.g., there are more X in County A than in County B). None of the imperfections in available data affects these uses significantly.

In sum, needs indicators provide a context for making decisions but they are too broad and imperfect in most cases to lead to decisions themselves. Understanding the needs data for an area can limit choices for the decision maker, since certain priorities may not make any sense, but they still leave decision makers with many priorities to choose among.

Perceptions of Need

Like social indicators, the perception data presented are useful but of limited value. The citizen, community leader, and agency professional survey data reflect the concerns of respondents. The priorities reported should not be given too much weight, however. Asking which "need" is most important is something like asking which leg of a table is most important. Obviously, all important needs must be attended to in some way. The survey data are perhaps most useful in presenting contrasts

between respondents of different races or in identifying problems that may be more apparent than real (e.g., the need for information and referral services).

United Way probably should not invest in broad perception surveys again. However, many organizations including government agencies often take surveys of target populations. The results of these could be used by United Way as a source of data in planning.

Human Services Profile

Public Expenditures

Most of the data relating to services provided by the public sector are presented in aggregate form. These data, taken from public plans, provide three kinds of information: they identify those actors active in an area; tell what the actors are doing (e.g., planning, funding, or providing services); and give the magnitude of their activities. While the exact amounts of dollars involved change frequently--due to Federal, state or local government decisions--the data presented portray a more accurate picture of public sector activity than could be obtained by surveying individual agencies. If one took an agency-by-agency survey to obtain the data, one would have no way of knowing what was provided by those agencies that did not respond.

United Way Funding Record

Data about what services United Way member agencies provide is, obviously, very important to United Way decision makers. The planning modules show what United Way is now funding in each service area and allow activities to be compared with public sector programs.

However, data about UWBA member agency activities are in a very imperfect state and need to be improved. The fields of service data provided by United Way agencies are sometimes inaccurate. This is not surprising since how to classify an activity is often an open question, e.g., classifying a particular youth activity as recreation, counseling, or education may be somewhat arbitrary. Data are also lacking about other funding provided to agencies and about client groups served. Since United Way has a degree of control in this area, it is an appropriate place to start improving the data. Better information would be helpful not only to United Way decision makers but to public planners as well.

Non-United Way Private Expenditures

Reliable data in this area are almost impossible to find. However, non UWBA funded charitable services represent such a small part of the human services system in the Bay Area that their exclusion does not destroy the overall picture very much. On the other hand, since these funders also provide flexible nongovernmental funds, it is important that United Way decision makers know what other charitable decision makers are doing when individual grant decisions are made. This, however, does not require comprehensive information for the Bay Area; it only requires linkages between private funders and United Way as decisions are made.

Conclusion

Overall, the needs and services data presented in the modules map the area in which United Way decision makers have to make decisions. Data alone cannot tell United Way decision makers what to do, but can tell what to pay attention to (e.g., an emerging problem) or what to avoid (e.g., an area where the government has preempted the field). Using the data, United Way decision makers can choose areas in which they want United Way to be active and can begin to specify which activities United Way should support. The next section discusses in more detail how this could be done.

Choosing An Appropriate Role In Service Areas

Given the size and complexity of the human service system and the relatively small--albeit important--role played by United Way dollars, United Way planners should consider very carefully the kinds of roles UWBA funded activities should play in the broader system. Simply allocating another \$50,000 or \$100,000 to any of the service areas described in this report is likely to make little difference. However, if funds fill a critical gap, leverage other funds, or are used to highlight needs to which the broader human service system will ultimately respond such resources can be critically important.

Overall, United Way planning should start with a knowledge of the areas in which United Way is active and what others are doing. As Louis N. Garcia, Executive Director of United Way of California has pointed out, the United Way planner should ask, "What can our system do which other community institutions cannot do as well or even do at all? What powers, resources and capabilities do other community institutions possess which the United Way needs? Which trade offs between public planning and the planning of voluntarism will strengthen both sectors? Which are merely duplicative?"

Four kinds of roles can be played by United Way in each service area in which it is active:

- Direct Funding--Individual services funded by United Way often play an important role in meeting needs for which other funding is not available. Directors and planning personnel in many agencies are supported by United Way funds. Also, many services for the entire populace, rather than just one target group such as the poor, may be funded only by United Way.

- Leverage Funding—The United Way can play an important role in using its funds to leverage public funds. Agencies can sometimes identify Federal or state funding sources willing to pay 50%, 60%, or 75% of the cost of the service if a required local match can be supplied. United Way's role in child care is one of the best illustrations of this kind of role. As state and Federal programs are reduced by budget cutbacks over the next few years, some opportunities for leverage may decline. On the other hand, budget pressures in local communities may force them to stop providing local shares for some existing programs which some United Way groups may choose to pick up to ensure program continuation.
- Demonstration Funding—United Way can play an important role in many service areas by funding innovative and demonstration projects. Changing family patterns, the developing expectations of minority groups, and national and Bay Area trends in employment, all generate needs for new kinds of services to meet new needs. Government is often, though by no means always, slow to respond to such needs. United Way's unrestrictive funding can be a powerful source of innovation in the human service system. If United Way makes a true commitment to demonstration funding of projects it must at the same time be committed to evaluation of these projects to determine their efficacy in meeting the human needs they were designed to serve. Many Federal "demonstration" projects have simply spawned permanent service projects and the principles of evaluation have been lost as every locality attempts to establish its own program.
- Planning and Advocacy
United Way can fund planning and advocacy efforts in order to affect both the services provided by other providers and other policies which contribute to exacerbating human needs. Oftentimes, human needs can be better met by regulatory action, such as reducing the need for unnecessary credentialed staffs in official agencies,

tax policy change such as requiring nonprofit institutions to serve the poor in order to keep their deductions, or administrative reform such as the promotion of equal opportunity. If United Way used its linkages with the business community and client groups to promote such changes, it could help solve problems in areas where it does not have funds to provide additional services.

Overall, United Way must continue to fund many service activities directly, yet it should carefully consider other roles needed to deal with changing problems. This suggests that the direct service grants by United Way of the Bay Area should continually be carefully evaluated to ensure they are the most productive use of limited resources. Over time, United Way should shift its activities toward meeting those needs that its decision makers have determined to be appropriate for United Way involvement. These needs will not necessarily be those that have been shown by any of the surveys to be "top priority" needs. Rather, priorities should be chosen in light of the role United Way will play in a given area and the level of resources it can bring to bear on a particular problem. It may well be that certain problem areas, such as hospital care, where massive amounts of funding are required to make a significant impact, are best left to the public sector while United Way devotes its funds to service areas where significant impact is possible with more modest funding levels.

Resources Available to United Way Decision Makers

The last consideration which United Way decision makers must take into account is the range of resources open to them. Three kinds of resources available to United Way can be identified:

- Funding--As pointed out above, United Way's flexible dollars can play an important role in meeting human needs. A small amount of United Way dollars used to leverage bank loans may provide far more housing dollars than some major government programs used to build new dwellings. Similarly, a small amount of funds provided to a seniors' group for self-help may be more effective than a series of Federal grants for service personnel.
- Access to corporate and labor sectors--The United Way has regular access to corporate and labor leaders that is denied to the public sector. It is increasingly apparent that factors such as bank investment policies and union hiring policies must be changed if some social problems are to be solved. United Way's access can provide a means to mobilize these nongovernment resources to help solve problems.
- United Way volunteers--Volunteers play many different roles in United Way programs. They serve on boards, help deliver services, and devote their own resources to help accomplish tasks. The public sector, by and large, is unable to tap this resource which has been uniquely developed by United Way.

Much work remains to be done to ensure the appropriate role of planning in UWBA's decision making processes. However, skillful use of the needs and services data presented in the following planning modules will allow United Way planners and decision makers to make choices about the appropriate role for United Way in meeting the many human service needs in each of the five Bay Area counties.

1. EMPLOYMENT AND ECONOMIC SECURITY

- 5. Community Economic Development Services
- 17. Employment Services
- 43. Vocational Rehabilitation Services

Perceptions of Need

Public and Consumer Survey
Agency and Community Leader Survey

Social Indicators

	1970	1977
Number in civilian labor force ^a	446,240	519,814 ^b

Households below poverty ^a		
County	8.1%	
Emeryville	13.0%	
Oakland	12.2%	
Berkeley	10.0%	

Percent of household below ^a Poverty headed by females	51.0%	
--	-------	--

Estimate of unemployment ^b		
County	6.5%	8.5%
Berkeley		10.7%
Oakland		10.1%
Hayward		8.4%
Fremont		6.3%
Union City		7.5%
City of Alameda		6.4%

Selected indicator of ^c populations vulnerable to acute unemployment	1975	
Berkeley Youth ^c		35%
Blacks		20%
County		10.1%

	1976	
West Oakland ^d		27%
North and East Oakland		19%
County		9.8%

End of Year Caseload ^c California Department of Rehabilitation	1976	
		2,791

Developmental Disabilities Planning and Advisory Council identified the need for more vocational training for persons with developmental disabilities.^e

^aPhase I, Alameda County Profile

^bCalif. Employment Development Department Office of Research

^cBerkeley Social Services Need Assessment

^dAlameda County Public Health Plan Vol. I

^eNeeds/Services Document Working Draft, Vol. 2

Potential Consumer/Clients ranked the need for employment and vocational rehabilitation services 3rd and 12th respectively out of 13.

21, or 10.6% indicated need for employment counseling services. 12, or 6.0% had used employment services.

3, or 1.5% indicated need for vocational rehabilitation services and 2, or 1.0% used the service.

Agency Professionals and Community Leaders reported the need for employment services to be the highest priority.

17, or 38% of agency professionals and 25, or 76% of community leaders indicated that job development, training, or other employment services were greatest unmet need.

Need for employment services are concentrated in Catchment Areas No. 17 (Berkeley), 18,20 (Oakland) and 22 (Hayward).

Populations most in need of employment services were youth, minorities and low income people.

Public Expenditures

Employment and Economic Security Cluster
Public Expenditure FY 78 \$94.0 million

In six communities in the County public agencies such as planning departments and redevelopment agencies are doing economic development research. Oakland is the only city with an active community economic development corporation.

	FY78 millions
Employment Services*	\$87.5
CETA Funding total*	85.3
Title I Training & Employment	13.0
Title II PSE	13.3
Title III Special Impact	11.0
Title VI PSE	48.9

The prime sponsors in the County administered CETA program ACTEB/ACAP, \$32.8 million, Berkeley CETA \$10.6 million and Oakland Dept. of Manpower Dev. \$41.9 million in FY78. \$2.1 million from SSA Title IV and XX, County GRS and CSA support other employment programs.*

* Needs/Services Document, Vol. 2., Alameda

County Human Services Council

Vocational Rehabilitation \$ 6.5
California Department of
Rehabilitation spends \$4.8 million
for assessment counseling, and
contract services. Other funds
are from the County Health Care
Services Agency

Decreasing CETA funding is expected particularly for Public Service Employment. Trend is away from block grants toward categorical grants with emphasis on vocational training and services to youth. Vocational Rehabilitation Service of the Rehabilitation Service reported as stable with emphasis on services to the severely disabled and independent living.

Human Services Profile

United Way Funding Record

Cluster has traditionally been low priority; however. United Way has historically supported vocational rehabilitation. One United Way agency, the East Bay Spanish Speaking Unity Council reported activities in community economic development.

United Way provided core funding for agencies specializing in publicly funded employment services. Agencies in Alameda County include: Spanish Speaking Unity Council, East Bay Spanish Speaking Foundation, Filipino Immigrant Services, Oakland Chinese Community Council and the Urban League.

United Way supports two agencies serving Alameda County specializing in vocational rehabilitation services. Alameda Co. Assn. for the Mentally Retarded and the S.F. Community Rehabilitation Workshop.

Non-United Way Private Expenditures

Issues

While employment is one of the highest ranked human service need economic development has received little attention either from the public sector or United Way.

Many survey respondents and employment indicators suggested that the employment problem is one of a need for jobs and job opportunities.

Indicators and surveys identify Catchment Area Nos. 17, 18, 20 and 22 as geographic areas with greatest employment services needs in the County.

Federal investment in employment and employment services is large and accounts for more than 30% of total social services expenditures identified in Alameda County.

United Way limited resources can have little impact on employment and economic security through direct service funding.

Vocational rehabilitation services seem a relatively low priority need in Alameda County. The disabled community is a relatively small segment of the population. Berkeley has a disproportionately large disabled population.

2. HEALTH
A. Medical Care Services

6. Community Health Clinic Services
22. Health Screening Services
24. Hospital Emergency Services
25. Hospital In-Patient Services
26. Hospital Out-Patient Services
36. Public Health Clinic Services

Social Indicators			Perceptions of Need	
			Public and Consumer Survey	Agency and Community Leader Survey
8.1% of households in County below poverty level (U.S. Census 1970)			Potential Consumer/Client Survey reported a high need for medical care services, particularly clinic services.	
Disease (number 11,000 pop.)			1970	1974
Venereal disease			7,777	7,194
(%)			(7.2)	(6.6)
Tuberculosis			177	157
(%)			(>1.0)	(>1.0)
Hepatitis			306	301
(%)			(>1.0)	(>1.0)
Infant mortality rate per thousand live births, 1970 (17.9), 1976 (12.7), and 1977 (13.2). 1977 Black infant mortality rate 22.6. (Alameda County, Planning for Public Health, Vol. I & II, July 1977)			1970	1975
Hospitals Offering Emergency Services			24	17
Major emergency department			7	N.A.
Basic emergency			9	N.A.
Provisional emergency			5	N.A.
Emergency referral services			3	N.A.
Hospitals Offering In-Patient Services				
Total number of beds			5,974	4,852
Occupancy rate			68.8%	70.9%
Number of hospitals			29	29
Hospitals Offering Outpatient Services			16	12
Outpatient renal dialysis				3
Rehabilitation out-patient unit			7	4
Psychiatric outpatient unit			7	5
Organized outpatient department			14	10
Bed Capacity in*				
Skilled nursing facilities			N.A.	6,374
Intermediate care facilities			6,735	N.A.

* Phase I, Alameda County Profile.

Human Services Profile				Issues
Public Expenditures		United Way Funding Record	Non-United Way Private Expenditures	
FY 1978: A Medical Care Service - \$57.9 million		United Way funds community health clinics, health screening and hospital outpatient services. United Way phased out support for hospital emergency, hospital inpatient and public health services because its contribution was less than 1% and public and private insurance payments seemed to support these services adequately.		Medical care treat service ranked very high among service needs with Consumers/Clients and Agency Professionals, Consumers and Client both expressed need for an indicated use of the public clinic services. Community leaders viewed the need for medical care treatment service as moderately low.
Community Health Clinics - \$2.6 million Sources of support include Co. GRS, SSA Title XX, Berkeley General Funds and CSA.				
Health Screening - \$308,394 Oakland CSA and Berkeley CDBG program support vision and hypertension screening services.		United Way funds the following medical care servicing agencies serving Alameda County: YWCA of Oakland (family planning), Herrick Hospital Department of Rehabilitation, SCARE, and five national health organizations (American Social Health Association, Hearing Society of the Bay Area, Multiple Sclerosis Society, S.F. Hearing and Speech Center, and the S.F. Heart Association.)		While preventive health may be an effective vehicle for reducing the need for treatment all of the respondent groups ranked it a low priority service need.
Hospital Emergency - \$1.2 million County Health Care Services Agency dominant provider and City of Alameda supports ambulance services to the local hospital for the medically indigent.				While venereal disease was down from the 1970 figure of 7.4% incidence in the population, it continues to be a significant problem with a 6.6% incidence in 1974. Other regularly monitored communicable diseases remained low incidence in Alameda County.
Hospital Inpatient and Outpatient Services - \$45.6 million County Health Care Services Agency operates two hospitals--Highland, an acute care facility, and Fairmont Hospitals which offer inpatient and outpatient services including psychiatric inpatient services. Approximately 13,269 patients were served in FY 1977. \$100,000 of Co. GRS funds were allocated to outpatient services.				As shown in the Indicators Column from 1970 to 1975 there was a decline in the number of hospitals offering emergency and outpatient care services. Cost cutting, more efficient allocation of specialized services and expansion of community health facilities largely account for this downward shift.
Public Health Clinics - \$8.2 million The County Health Care Services Agency/ Public Health Service provides service in all areas of the County except Albany/ Berkeley which is serviced by the Berkeley Public Health Department.				
While medical care services are likely to be somewhat reduced in the wake of Proposition 13 they are less vulnerable than other human service area to large cutbacks. More careful billing to Medicare and Medical are increasing reimbursement for County Hospital Services.				

2. HEALTH
B. Mental Health Services

2. Alcohol and Narcotics Treatment Services
13. Crisis Intervention Services
32. Mental Health Services

Perceptions of Need			Human Services Profile		
Public and Consumer Survey Agency and Community Leader Survey			Public Expenditures	United Way Funding Record	Non-United Way Private Expenditures
Social Indicators			Issues		
	1970	1975	Social indicators suggest that the need for mental health service has remained stable or slightly increased from 1970 to 1975. The elderly appear to be underserved.		
Adult Drug Law Violations Number*	6,205	6,765	Groups survey diverged in their opinion on the need for mental health services, but generally believe the need moderate to low with the exception that agency professionals thought the need for mental health and crisis intervention services was high.		
Number per 1,000 adult population*	8.4%	N.A.	Funding for mental health service from government source is likely to decline. State hospital utilization for acute care was cut 30% from 140,000 to 90,000 days.		
Adult Drug Violation as Percent of all Adult Felonies*	45.6%	46.0%	There is substantial overlap between mental health services and counseling and residential care services identified in the Social Development Cluster.		
Juvenile Drug Violations Number*	2,655	2,100	Mental health services for offenders is a difficult issue because of fundamental differences in professional law enforcement and mental health perspectives. However, work is underway to improve service to inmates. A Criminal Justice Inpatient Ward has been established at Highland Hospital.*		
Number per 1,000 juvenile population*	12.5%	N.A.	* Needs/Services Working Draft, Vol. 2.		
Juvenile Drug Violations as Percent of All Juvenile* Violations	10.1%	10.2%			
Reported Hepatitis - Type B*	47	42			
Deaths Due to Drug Abuse*	120	137			
Willful Homicides (# offenses)*	98	162			
Forcible Rapes (# offenses)*	437	575			
Aggravated Assaults (# offenses)*	2,089	3,603			
Assault and Battery (# arrests)*	2,337	3,427			
Reported Child Abuse Cases*	N.A.	378			
	1970	1974			
State-aided Mental Health Facilities*					
Inpatient					
Admissions	3,054	4,331			
Case load	1,240	85			
Outpatient					
Admissions	18,584	19,959			
Case load	2,394	3,538			
*Phase I, Alameda County Profile					
The Alameda County, Annual Area Plan for Progress Toward a Comprehensive Coordinated Services System for Older Persons (April 1977) indicated that while 25% of suicide victims are elderly persons, only 3% of those serviced by mental health services are elderly.					
The Alameda County Plan for Mental Health Services identified the following mental health needs: residential treatment facilities for children and youth with bilingual and bicultural capabilities, day treatment services for children located in southern Alameda County with bilingual/bicultural capabilities, and development and/or improvement of services for populations at risk (a) elderly, (b) minorities, (c) isolates.					
The Alameda County Mental Health Committee determined that 40-45 persons arrest each month need mental health care. Of these 70-75% are charged with felonies.**					
** Needs/Services Working Draft, Vol. 2.					

3. BASIC MATERIAL NEEDS									

4. PUBLIC PROTECTION

- 4. Community Alternatives for Corrections
- 10. Consumer Protection and Information
- 15. Disaster Relief Services
- 31. Legal Assistance Services

Perceptions of Need			Human Services Profile			Issues	
Public and Consumer Survey Agency and Community Leader Survey			Public Expenditures			Non-United Way Private Expenditures	
Social Indicators			United Way Funding Record				
	1970	1975					
Juvenile arrests for delinquency*	N.A.	3,796	FY 1978 - \$4.7 million	Only legal assistance and disaster relief have been United Way priorities. Several United Way agencies offer community alternatives to corrections and one agency (Alameda County Legal Aid) offers consumer protection and information services. United Way agencies providing services in this cluster include:		Public protection is a area of moderate priority which consumers and clients surveyed and low priority with agency professionals and community leaders surveyed.	
Juveniles on probation*	3,393	3,327	Community Alternative for Corrections - \$1.7 million	Community Alternatives for Corrections - Stile Hall University; YMCA, Volunteer Bureau of Alameda County, Allied Fellowship Service, Southern Alameda County YWCA, Children's Home Society, the Alameda County and Piedmont Councils of the Boys of America, and the Salvation Army.		While most public protection services are provided by the local State and Federal government public protection social services are provided by United Way agencies such as the American Red Cross and County legal services. Funding for public protection social service is very low.	
Adults on probation*	8,545	N.A.	County Probation Department spends about \$1.6 million for deinstitutionalization of status offenders programs and other \$100,000 of County GRS funds support community-based agency alternative corrections programs for adults and youth.			Consumer protection and information is an area which consumers and clients felt there was a substantial gap between need and availability of service. Public and United Way expenditure analysis indicate almost no resource directly allocated to this field of service.	
278,979 persons 25 years and over had not completed the fourth year of high school and 80,000 persons were below the poverty level in the County in 1970*			Consumer Protection and Information - \$7,500	Disaster Relief - The American National Red Cross and the Salvation Army.			
* Phase I, Alameda County Profile			County GRS funds no other funding for service identified.	Legal Assistance - Alameda County Legal Aid (not funded in FY 1979), Asian Law Caucus, Social Services Bureau of the East Bay.			
Alemeda County Legal Aide**			The Need/Services Document, Vol. 2 identified 13 major providers of Consumer Services in Alameda County. Most were located in Berkeley and Oakland and the services most frequently offered were I&R (38%) and consumer education (26%). Dublin, Peidmont, Pleasanton and San Lorenzo had no services.	Protective Service for Children and Adults - one.			
Case load in 1977 was 5,683 cases of which 1,054 were debt problems and 1,398 were landlord/tenant problems.			Disaster Relief				
Public Defenders office case load estimate for 1977-78**			No breakdown of funds for this service identified. County Health Care Services Agency/Emergency Medical Service also does disaster relief planning for the County.				
Felonies		6,700	Legal Assistance - \$1.2 million				
Misdemeanors		21,000	Alameda County Legal Aid receives about \$917,000 Legal Service Corporation Act funding to service low income groups and individuals.				
Mental Health		960					
Juveniles		5,600	Protective Services - \$2 million				
Guardianship		750	The County Social Service Agency spends about \$2 million for protective care services for neglected/abused children and for aged, blind, and disabled adults.				
Total cases		35,010					
** Need/Services Document, Vol. 2.							
Potential Consumer/Client Surveys:							
15, or 7.5% (ranked fifth out of 19) of respondents indicated need for consumer protection and information services. Only 7, or 3.5% used them.							
13, or 6.5% (ranked sixth out of 19) of respondents indicated need for legal assistance services and 9, or 4.5%, used them. Most users thought legal assistance services were adequate and two rated them outstanding.							
Agency Professionals and Community Leaders Surveys:							
3, or 7% (ranked tenth out of 12) of agency professionals and 5, or 15% of community leaders thought that anti-crime, anti-delinquency and other public safety services. While agency professionals tended to see the need for these services evenly distributed throughout the County; community leaders saw the need as greatest in M. H. Catchment Areas 18 and 20 (East Oakland).							
4, or 9% (ranked ninth out of 12) of agency professionals and 4, or 12% (ranked eighth out of 12) of community leaders felt that protective services for children or adults was the greatest unmet need. Need for protective services identified most often in M. H. Catchment Areas 17 (Berkeley), 18 and 20 (Oakland), 19 (City of Alameda). Some need for protective services also noted in southern Alameda County.							

5. SOCIAL DEVELOPMENT SERVICES
A. Supplemental Education
40. Supplementary Education Services

Perceptions of Need		Human Services Profile			Issues
Social Indicators	Public and Consumer Survey Agency and Community Leader Survey	Public Expenditures	United Way Funding Record	Non-United Way Private Expenditures	
In 1970 10.3% of persons 16-21 years not high school graduates and enrolled in school.*	Supplementary Education Services ranked 10th and 3rd, respectively, by agency professionals and community leaders. Open-ended questions revealed that community leaders were concerned most often with low quality public education, which accounts for its high ranking among needed services.	Public Expenditure for Social Development Services in FY 1978 - \$19.1 million Supplementary Education - \$688,199 Oakland CSA funding for Head Start: \$531,000	Approximately 55% of United Way funds are allocated to agencies whose primary service thrusts are Social Development Service--most are multicounty and federated youth service agencies, such as the YMCA, YWCA, Scouts, Boys and Girls Clubs; established sectarian and non-sectarian social services, i.e., Catholic Social Services, Jewish Welfare Federation, Family Service Agency, Salvation Army, Social Service Bureau of the East Bay, and more specialized groups such as American Red Cross, United Service Organization (USO), and Children's Home Society of California. Other are neighborhood or minority based agencies. Supplementary Education Services Include tutorial programs, crafts and skills training special interest classes, etc. These services are typically offered by agencies providing services under other sub-clusters particularly Group Oriented Services. Agencies most often are multicounty and youth serving federal agencies such as Red Cross, YMCA, YWCA, Boys and Girls Clubs, Boy Scouts, Campfire Girls. Also community based agencies such as East Bay Spanish Speaking Foundation, the Oakland Chinese and the International Friendship House--historically a moderate priority area.		United Way is a major actor in the provision of social development services. It provides core funding for large multicounty social service and youth serving agencies that dominate this cluster of services as well as smaller community based agencies. Supplementary education appears to be a relatively low priority with agency professionals and community leaders. However, community leaders seem very concerned with the quality of public elementary and secondary education. There are numerous United Way agencies offering supplementary education services. Public investment identified in supplementary education is very low; however, library summer schools and adult education services are not included. Many local government supported supplementary education services such as summer school adult education program-library services have been sharply reduced as a result of Proposition 13 budget cuts. If State aid is not made available to replace property tax revenue losses further dramatic reductions can be expected. User charges may be imposed or increased for local government services.

* Phase I, Alameda County Profile

5. SOCIAL DEVELOPMENT SERVICES
E. Counseling and Residential Care

12. Counseling
33. Non-Residential Treatment
37. Residential Treatment

Social Indicators			Perceptions of Need		Public Expenditures		Human Services Profile		United Way Funding Record		Non-United Way Private Expenditures		Issues	
	1970	1975	Public and Consumer Survey Agency and Community Leader Survey		Public Expenditures		Human Services Profile		United Way Funding Record		Non-United Way Private Expenditures		Issues	
Adult Misdemeanor Arrests for:*			Potential consumers/clients surveyed rank the need for counseling and residential treatment service low priority.		Counseling and Residential Care Services - \$6.2 million		Approximately 55% of United Way funds are allocated to agencies whose primary service thrusts are Social Development Service--most are multicounty and federated youth service agencies such as the YWCA, YMCA, Scouts, Boys and Girls Clubs; established sectarian and non-sectarian social services, i.e., Catholic Social Services, Jewish Welfare Federation, Family Service Agency, Salvation Army, Social Service Bureau of the East Bay, and more specialized groups such as American Red Cross, United Service Organization (USO), and Children's Home Society of California. Other are neighborhood or minority based agencies.		Approximately 55% of United Way funds are allocated to agencies whose primary service thrusts are Social Development Service--most are multicounty and federated youth service agencies such as the YWCA, YMCA, Scouts, Boys and Girls Clubs; established sectarian and non-sectarian social services, i.e., Catholic Social Services, Jewish Welfare Federation, Family Service Agency, Salvation Army, Social Service Bureau of the East Bay, and more specialized groups such as American Red Cross, United Service Organization (USO), and Children's Home Society of California. Other are neighborhood or minority based agencies.		United Way is a major actor in the provision of social development services. It provides core funding for large multicounty social service and youth serving agencies that dominate the cluster of services as well as smaller community based agencies.		United Way is a major actor in the provision of social development services. It provides core funding for large multicounty social service and youth serving agencies that dominate the cluster of services as well as smaller community based agencies.	
Drunk	15,631	12,136	9, or 4.5% (ranked eighth out of 13) respondents indicated need for counseling or mental health services and they all used the service.		County Health Care Services Agency - \$4.2 million		Youth and family counseling services for alcohol and drug abuse and child abuse. Also counseling for other problems.		Youth and family counseling services for alcohol and drug abuse and child abuse. Also counseling for other problems.		Generally, consumers and clients viewed the need for counseling and residential care services low. Agency professionals and community leaders view the need for such services only slightly higher. Agency professionals rank the need for mental health and crisis intervention services second highest.		Generally, consumers and clients viewed the need for counseling and residential care services low. Agency professionals and community leaders view the need for such services only slightly higher. Agency professionals rank the need for mental health and crisis intervention services second highest.	
Disorderly conduct	353	266	3, or 1.5% (ranked twelfth out of 13) respondents indicated need for alcohol treatment services and 2, or 1% used the service.		County GRS - \$2 million		Typical agencies offering counseling are multicounty federated agencies, such as Catholic Social Services, Family Service Agency, Jewish Family Service Agency, Salvation Army, etc. Non-residential and residential treatment; homes for unwed mothers, including Florence Crittenton and Mt. St. Joseph, St. Elizabeth Services to children disabled by emotional disturbance, mental illness, retardation are provided by such agencies as Fred Linch, Youth Center, and Lincoln Child Center.		Typical agencies offering counseling are multicounty federated agencies, such as Catholic Social Services, Family Service Agency, Jewish Family Service Agency, Salvation Army, etc. Non-residential and residential treatment; homes for unwed mothers, including Florence Crittenton and Mt. St. Joseph, St. Elizabeth Services to children disabled by emotional disturbance, mental illness, retardation are provided by such agencies as Fred Linch, Youth Center, and Lincoln Child Center.		Future government support for counseling and residential care service largely depend on state Short/Doyle and Federal funding. Services funded by county GRS are vulnerable to Proposition 13 belt tightening.		Future government support for counseling and residential care service largely depend on state Short/Doyle and Federal funding. Services funded by county GRS are vulnerable to Proposition 13 belt tightening.	
Disturbing the peace	1,032	839	1, or 0.5% (ranked thirteenth out of 13) respondents indicated need for drug treatment services and 1, or 0.5% used services.		Agency professional and community leader survey felt counseling and the need for residential treatment services was moderate.									
Juvenile Arrests for:*			Agency professional and community leader survey felt counseling and the need for residential treatment services was moderate.		5, or 11% (ranked eighth) of agency professionals and 6, or 1% (ranked sixth) of community leaders felt that alcohol and drug abuse treatment services were the greatest unmet need.									
Misdemeanors	N.A.	9,549	16, or 36% (ranked second) of agency professionals and 6, or 18% (ranked sixth) of community leaders saw mental health and crisis intervention services as the greatest unmet need.		Agency professionals felt that alcohol and drug abuse treatment service needs were only of acute need in MH Catchment Areas 18 and 20 (Oakland); however, community leaders thought they were distributed throughout the County. Populations identified as having the greatest need for substantial abuse treatment were youth, women, and minorities.									
Delinquent tendencies	N.A.	3,796	Mental health and crisis intervention service needs were believed greatest in MH Catchment Areas 17 (Albany/Berkeley) and 18 and 20 (Oakland). Children, youth, elderly, nonelderly adults and minorities were the populations most frequently noted as needing mental health/crisis intervention services.											
Rehabilitation Clients Year End Case load in 1977**	2,791													

*Phase I, Alameda County Profile
**California Department of Rehabilitation

5. SOCIAL DEVELOPMENT SERVICES
C. Individual and Family Services

1. Adoption Services

9. Companionship Services

14. Day Care Services

16. Emergency Assistance Services
19. Foster Home Care Services

23. Homemaker Services

30. In-Home Health Services

41. Supportive Services to Separated or Relocated Individuals and Families

Perceptions of Need			Human Services Profile		
Public and Consumer Survey Agency and Community Leader Survey			Public Expenditures		
Potential Consumers/Clients Surveys:			Services to Individual and Families - \$11.5 million		
Homemaker Service - ranked 9th as the service most needed by potential consumers and clients, 7, or 3.5%, needed services and 3, or 1.5%, used them.			Adoption Services - \$450,000 County Welfare Adoption Services Foster Care - \$1,130,609 County Social Services Agency out of home children's program funding by Title XX, 5,446 children served.		
Family Planning Services - four, or 2.0% (ranked 11th), needs services and four, or 2.0%, used services, 3 regularly.			Day Care - \$1.8 million Service supported by SSA Title XX, Berkeley, Oakland, and ACTEB/ACAP and direct CSA funding \$634,000, City of Berkeley CDBC, and general funds \$320,000. \$92,000 for senior day care spent in County.		
Day-Care - (ranked 4th) 16, or 8.0%, of respondents needed service; 10, or 5%, actually used services.			Inhome Health and Homemaker Services - \$7 million largely SSA Title XX funding of supportive homemaker services to families and elderly and disabled persons.		
Visiting Nurse - (ranked 10th) 5 respondents, or 2.5%, needed the service; the same number regularly used the service.			Companionship Services - \$87,770 Big Brother and Sister programs and elderly companionship		
Emergency assistance - (ranked 11th) 4 respondents, or 2.0%, needed the service and 2, or 1.0%, used the service.			Companionship Services - \$885,552 Funding from County GRS, Oakland CSA and cities for victims services, emergency shelter for battered children and women and emergency assistance for low income individuals and families.		
Agency Professionals and Community Leaders:			Supportive Services to Separated and Relocated Individuals and families - \$140,454. Traveler's Aid and Indo-Chinese Refugees programs.		
Day Care services were ranked 8th and 5th, respectively, by agency professionals and community leaders as among greatest unmet human services.			Emergency Assistance - \$885,552 Funding from County GRS, Oakland CSA and cities for victims services, emergency shelter for battered children and women and emergency assistance for low income individuals and families.		
Services to Ethnic Minorities and Newly Arrived Immigrants were ranked 5th and 8th, respectively, by agency professionals and community leaders as most needed.			Supportive Services to Separated and Relocated Individuals and families - \$140,454. Traveler's Aid and Indo-Chinese Refugees programs.		
Social Indicators			United Way Funding Record		
Foster Home Care: children in Foster Homes in one month 1977, 996. Children placed in Institutional Settings, 332 in one month 1977.*			Approximately 55% of United Way funds are allocated to agencies whose primary service thrusts are Social Development Service--most are multicounty and federated youth service agencies such as YMCA, YWCA, Scouts, Boys and Girls Clubs; established sectarian and non-sectarian social services, i.e., Catholic Social Services, Jewish Welfare Federation, Family Service Agency, Salvation Army, Social Service Bureau of the East Bay, and more specialized groups such as American Red Cross, United Service Organization (USO), and Children's Home Society of California. Other are neighborhood or minority based agencies.		
Persons Aged 16-64 Disabled or Handi-capped (but not inmates or attending school)*	64,803		Day Care Services - 22 agencies \$680,000 in five counties, seven of which offer referral or direct services in Alameda County - high priority.		
Families in Poverty*	21,671		Homemaker Service - Visiting Nurse Association. Home, health and counseling - some support - not priority.		
Number of Families Below Poverty Level with Female Head of Household and Children*	9,515		Companionship Services - Big Brothers, Family Agency of Alameda County - some support - not priority.		
Persons 1.25 Poverty Level*	158,204		Emergency Services and Supportive Services to Separated and Relocated Individuals and Families - Traveler's Aid, Salvation Army, and Red Cross - some regular support - not high priority.		
	Jan. 1970	Jan. 1977	Adoption Services - none. Low priority.		
Requests and Signed Applications to Adopt a Child Received During Month*	120	70	Foster Care - Children's Home Society - low priority.		
Applications Approved	22	2			
Otherwise Terminated	9	15			
Approved Homes Available at End of Month*	62	78			
Children with Adoptive Families* Adoptions Completed	20	7			
Under Supervision at End of Month	300	136			
	1970	1975			
Number of Day Care Facilities Children	N.A.	705			
People 65 and over	N.A.	129			
Capacity of Day Care Facilities Children	N.A.	2,823			
People 65 Years and Over	N.A.	835			

Issues

United Way is a major actor in the provision of social development services. It provides core funding for large multicounty social service and youth servicing agencies that dominate this cluster of services as well as smaller community based agencies.

With the exception of Day Care for Children and Services to Ethnic Minorities and Newly Arrived Immigrants which were rated of moderate priority in need.

Of the \$11.5 million public investment in this subcluster, \$8.8 million is spent for inhome health-homemaker services and day care services.

Future funding is largely dependent upon State aid, Federal funding which have been declining in recent years. County GRS supported emergency assistance programs may be particularly vulnerable to reductions due to Proposition 13 related GRS reductions.

* Phase I, Alameda County Profile

5. SOCIAL DEVELOPMENT SERVICES
D. Group Oriented

- 3. Camping Services
- 20. Group Supportive Services
- 21. Health, Safety and Physical Education Services
- 34. Personal Growth Services
- 39. Social Adjustment Services

Perceptions of Need

Public and Consumer Survey
Agency and Community Leader Survey

Social Indicators

Indicators of need tending to also fall in previously identified subclusters include numbers in poverty juvenile arrests, number of children in foster homes, etc.

Potential Consumer/Clients:

Recreational Programs ranked 1st as the service for which consumers and clients most often expressed need. 45 respondents, or 22.6%, said they needed services, 41, or 20.6%, used services of which 34 were regular users of services. 36 users felt that recreation services were either outstanding or adequate. 22 users were aged 2-18 and 21 users were aged 18-65.

Human Services Profile

Public Expenditures

Group Oriented Services - \$545,000
Largely CSA and County GRS funds supporting recreational and cultural programs.

United Way Funding Record

Many United Way agencies are youth serving organizations such as YMCA, YWCA, Boy Scouts, Campfire Girls, Boys and Girls Clubs, as well as multipurpose agencies such as the Salvation Army, Jewish Welfare Federation providing recreation, health, education and safety programs as well as some social adjustment, services for youth. Other are community based agencies such as the East Bay Spanish Speaking Foundation and the Oakland Chinese Community Council offering group supportive and social adjustment services to minority and other vulnerable groups - historically a priority area.

Non-United Way Private Expenditures

Issues

United Way is a major actor in the provision of social development services. It provides core funding for large multicounty social service and youth serving agencies that dominate this cluster of services as well as smaller community based agencies.

While recreation was the service most often indicated by consumers and clients as being needed, the fact the 91% of those indicating need also used the recreation services suggests that the need is being partially met by existing services.

Many local government supported group oriented services such as recreation and culture program have been sharply reduced as a result of Proposition 13 revenue losses. Some localities are either imposing or increasing user charges on these services to cover all or part of revenue losses.

6. COMMUNITY ORGANIZATION AND MANAGEMENT SERVICES

7. Community Organization Services

8. Community Volunteer Services

11. Coordinative Management Services
29. Information and Referral Services

35. Public Education Services

38. Research Services

Perceptions of Need

Public and Consumer Survey
Agency and Community Leader Survey

Potential Consumer/Client Survey rating of information and referral services:

	No Services Used	1-2 Used	3 or More Used
Excellent	1.9%	4.3%	4.5%
Adequate	13.8	21.8	50.0
Difficult to obtain infor- mation	15.8	29.0	31.9
Never tried	68.5	44.9	13.6
Don't know	--	--	--
Total	100.0% (108)	100.0% (69)	100.0% (22)

Agency and Community Leader Surveys:

Two agency professionals and four community leaders indicated that opportunities for community based service delivery or for community participation in decision making were in the area of greatest unmet needs and it ranked 11th and 8th respectively for the two groups.

Three agency professionals and eleven community leaders indicated that General Supplementary Educational Services were among the greatest unmet needs ranked tenth and third respectively for the two groups.

One agency professional and three community leaders saw better program coordination or more efficient administration and service delivery among the greatest unmet need ranked 12th and 9th respectively for the two groups.

Human Services Profile

Public Expenditures

FY 1978 - \$2,309,622

Community Organization - no public funds identified, however, community organization activities are undertaken by many organizations as a part of their administrative or service functions.

Community Volunteers - \$68,566
County GRS
Many community agencies use volunteers, but do not record their value or costs for supervision.

Coordinative Management - \$351,859
County Department of Aging
ACTEB/ACAP

Research - \$34,566

Information and Referral - \$1,854,631
County GRS
SSA Title XX
City GRS and CSA
CETA

Public Education - no public funds identified

United Way Funding Record

Community Volunteer - Volunteer Bureau of Alameda County and Valley Volunteer Bureau, both specialize in recruiting, training and placing volunteers. Multi-County agencies providing service include: Red Cross, Boy Scouts and Big Brothers.

Community Organization - Alameda County Mental Health Association, Oakland Chinese Community Council; Multi-County Services include Jewish Welfare Federation and Boy's Club, and Catholic Social Services.

Coordinative Management - Child Care Coordinating Council of Alameda County, Urban League, Jewish Welfare Federation of Alameda and Contra Costa, Catholic Social Services, East Bay Spanish Speaking Foundation, and Spanish Speaking Unity Council.

Information and Referral - East Bay Spanish Speaking Foundation, Oakland Chinese Community Counsel, Filipino Immigrant Services, Mental Health Association of Alameda County, International Institute of the East Bay, Child Care Coordinating Counsel of Alameda County. The above agencies specialize in information and referral, but all United Way agencies have at least some minimal I&R services.

Public Education - Alameda County Association for Mentally Retarded, Alameda County Mental Health Association, CARE, Family Service Agency of Berkeley, and Family Service Agency of the East Bay provide service designed to make information about health problems and service available to the public.

Research - Bay Area Urban League is the one agency reporting activity in the field of service; however, many other agencies undertake research as part of program development and advocacy activities.

Non-United Way Private Expenditures

Issues

Community Organization and Management services are a low priority with all survey respond groups. However, in light of Proposition 13 services in this cluster may prove important vehicles for stretching more scarce dollars for human services.

Community volunteer services may well be a way to keep library and recreational services open and to supplement paraprofessional and clerical staff of some social service agencies.

New coordinative management arrangement which reduce duplication and administrative costs of human services programs while at the same time attempt to maintain adequate levels of service will require leadership from both the public and private sector.

Research design to explore the effacacy and efficiency of new human services technologies and alternative delivery approach may be profitable investments for the Bay Area human services system.

Information and referral services seem adequately funded in the County; however, there is a certain amount of fragmentation in the services which can make it difficult for consumers to access the system.

ALAMEDA COUNTY PLANNING DOCUMENTS

Numerous documents were used in the preparation of the Alameda County discussion package. Many of these were prepared on a one-time basis without plans for periodic updating. Others are updated on a regular basis and United Way should initiate procedures to obtain updated versions. All documents collected for use during this project (some of which were supplied by United Way planning staff) will be turned over at the conclusion of this assignment. Listed below are planning documents that are regularly updated. Most recent versions should be available.

Annual Area Plan for Progress Toward A Comprehensive Coordinated Services System for Older Persons. The Alameda Area Agency on Aging prepares an annual plan that analyzes the service needs of the elderly and resources to meet those needs. The plan also identifies priorities of the Alameda County program, specific objectives for the year and program funding.

Plan for Alcoholism and Alcohol Abuse Services. The Health Care Services Agency, Alcohol and Drug Abuse Service prepares an annual plan which describes the alcohol abuse services, objectives, at risk population, budget and projections of need.

Plan for Drug Abuse. The Health Care Services Agency, Alcohol and Drug Abuse Service prepares an annual plan. The plan describes problems, needs, and priorities, specifies the budget for Short-Doyle funds.

Plan for Mental Health Services. The Health Care Services Agency, Mental Health Service prepares an annual plan for Short-Doyle funding. The plan describes needs, objectives, and priority for services. It also identifies public expenditures for mental health services in the county and describes the mental health service system.

Annual Action Plan (for Criminal Justice). The Alameda Regional Criminal Justice Planning Board prepares an annual plan which identifies program priorities and problems. It describes the criminal justice programs funded under the Law Enforcement Assistance Act.

Annual Statewide Social Services Plan. The California Department of Health and Welfare Agency prepares a plan for expenditure of SSA Title XX funds. The plan covers a needs assessment for mandated social services, identification of resources and setting of priorities.

Community Development Block Grant Application. The Alameda County Planning Department prepares an annual application to the U.S. Department of Housing and Urban Development for Community Development Block Grant funds. This application includes a statement of needs, objectives and programs for use community development funds. It also includes a Housing Assistance Plan which assesses the housing stock, identifies housing needs and specifies annual and long-term housing goals.

Comprehensive Employment and Training Act Annual Plan. ACTEB/ACAP, the City of Berkeley CETA and Oakland Department of Manpower Development produce annual plans which identify needs and priorities, set programs and employment goals for the year.

City and County Budgets. The County and each of the eleven incorporated cities prepare an annual budget and other budget documents. The county budget and some city budgets provide information about locally funded social services.

Human Services Inventory. The Social Services Agency produces a directory of social services in the county. The services are listed both by community and by type of service. It also specifies some information about service hours and eligibility.

79 02592 pt.1

U.C. BERKELEY LIBRARIES



C123313822

INSTITUTE OF GOVERNMENTAL
STUDIES LIBRARY

DEC 16 2024

UNIVERSITY OF CALIFORNIA

